



David Kuchenbecker M.D.

Windward Urology

30 Aulike Street, #602

Kailua, HI 96734-2752

Telephone: (808) 261-4884 Fax: (808) 261-4885

Patient: Star Aholelei

Date of birth: November 17, 1963

Current date: July 27, 2005

To make concern,

I will no longer be seeing patients from the Halawa Correctional Facility and would suggest referring the patient to the Queen Emma clinic for further treatment and evaluation. Mr. Aholelei's ultrasound demonstrates a 9 mm non-obstructing stone in the lower pole of the right kidney. CT scan from last year demonstrated a 6 mm stone in the same location. Though these are different imaging modalities there does appear to be a slight increase in size of the stone over the past year. Previous stones have been both calcium oxalate and uric acid. I would suggest obtaining a KUB. If the stone is not visible this would suggest that the stone is uric acid in composition and should be able to be dissolved with alkali therapy using either sodium bicarbonate or Uroocit-K. If the stone contains calcium i.e. is visible on plain KUB, I would consider ESWL.

Sincerely,

David A. Kuchenbecker MD

A handwritten signature in black ink, appearing to read 'D. Kuchenbecker', enclosed within a circular scribble.

EXHIBIT AA

008



ST. FRANCIS MEDICAL CENTER WEST

IMAGING REPORT

91-2141 Fort Weaver Road
Ewa Beach, Hawaii 96706Patient Name: AHOLELEI, STAR
Address: PO BOX 1839,
PEARL CITY Hawaii
96782Sex: Male Age: 41 Years
DOB: 11/17/63Med Rec #: 09-08-01
Location: Imaging - West**Imaging Report**

Procedure	Ordering Physician	Accession Number	Exam Date/Time
US Renal Retroperitoneal Sonography	BAUMAN, KAY	US-05-0002537	04/08/05 15:30:00

REASON

KIDNEY STONES

US read

RENAL ULTRASOUND

Sonographic examination of the kidneys was performed.

No prior examination is available for comparison at this time.

There is an approximately 9 mm shadowing echogenic focus in the lower pole of the right kidney consistent with renal calculus. No other definite renal calculi are identified. There is no evidence of significant hydronephrosis or perinephric fluid collections. The kidneys are otherwise unremarkable on appearance. The right kidney measures approximately 11.8 cm in length. The left kidney also measures approximately 11.8 cm in length. Evaluation of the urinary bladder with color Doppler demonstrates presence of bilateral ureteral flow jets. The distended bladder is grossly unremarkable on appearance.

US impression

Approximately 9 mm calculus in the lower pole of the right kidney with no evidence of significant hydronephrosis. Otherwise essentially unremarkable examination as described above.

INTERPRETING PHYSICIAN: ERDMAN, DANIEL E

ELECTRONICALLY SIGNED BY: DANIEL E. ERDMAN DATE SIGNED: 04/11/2005 09:40

TRANSCRIBED BY: BN TRANSCRIBED DATE: 04/08/2005 17:16

CASTLE MEDICAL CENTER
LITHOTRIPSY DISCHARGE INSTRUCTIONS

As you have previously been told, your treatment with the Extracorporeal Shockwave Lithotripsy (ESL) did not make your stone magically disappear. The purpose of the treatment with the ESL was to pulverize stones so that the fragments can be passed through the urinary tract. You may or may not pass stone fragments before you leave the treatment facility. If you do not, do not be alarmed as some patients do not begin passing fragments until several weeks (*or occasionally, 1-2 months*) after treatment. A high intake of fluids, at least 8 glasses a day for several days, will help the fragments pass.

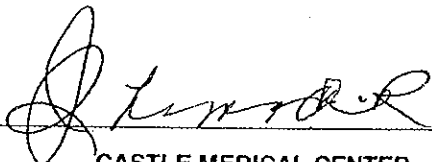
Please strain your urine with the strainer which your nurse will give you.

Please save some stone fragments and give them to your urologist at your next office visit so that he may send them for analysis.

You may have red-tinged urine for up to 24 hours following ESL. You may also notice slight bruising on the treated side. Most patients after treatment with the ESL will be placed on an antibiotic for several days. Patients may be given a prescription for a "*pain killer*" after treatment with ESL although usually the passage of small fragments of stone is without pain. You should resume taking any medications you were taking before the lithotripsy unless you have been told to discontinue them.

You may resume normal activities after discharge from the treatment facility. Indeed, walking and mild exercise is beneficial as activity will help stone fragments pass. However, if you are taking the "*pain killer*" which may have been prescribed for you at discharge, you should not drive or operate machinery.

If you have red-tinged urine longer than 72 hours, have persistent nausea and vomiting, experience severe pain which is unrelieved by the pain killer which was prescribed for you, or if you have a fever greater than 101 degrees, you should call your doctor. Even if you do not experience any problems, you should call him and schedule an appointment for approximately 2 weeks after treatment at which time x-rays of your kidneys may be done. Your doctor's office will be informed of the results of your procedure. Also, he will be sent a treatment summary of your procedure.



CASTLE MEDICAL CENTER
640 ULUKAHIKI STREET
KAILUA, HAWAII 96734

LITHOTRIPSY DISCHARGE INSTRUCTIONS



AMOLELEI, STAR V
KUCHENBECKER, DAY 7/30/2003
43260827 16-91-20 2709 0
11/17/1963 M/039Y NOR

**Adventist
Health****Castle Medical Center**

Radiology Report

Imaging Services Department
640 Ulukahi Street
Kailua, HI 96734-4498
Voice: (808) 263-5166Patient: **AHOLELEI, STAR V.**DOB: 11/17/1963 Age: 42y Sex: M
Location: OUTPATIENT
Med Rec #: 18-91-20Ordering MD: DAVID A. KUCHENBECKER, MD
Attending MD: DAVID A. KUCHENBECKER, MD
Referring MD:

Acct# / Seq#: 43472141 / 1

Exam Date: June 29, 2004
CT ABDOMEN W/O CONTRAST**Reason for Exam:**
KIDNEY STONES**Report**

CT Urogram is performed without oral or intravenous contrast.

A 6 mm stone is seen in the right lower kidney, nonobstructive. A few small parapelvic cysts are seen in the left kidney measuring up to 1.5 cm in size. No left kidney stones are seen. There is no hydronephrosis or hydroureter. The bladder is unremarkable.

Impression

A 6 MM STONE IN THE RIGHT LOWER KIDNEY, NONOBSTRUCTIVE.

Transcribed: 06/29/2004 09:36 CHARLIE DASPIT
Reading Radiologist.....: Chuong Nguyen, M.D.
Report Verified by.....: Chuong Nguyen, M.D.

06/29/2004

097

Aholalei, Star

DATE	TIME	PLAN
02.11.04	(1000)	Psytr: Seen in module B.
		It referred again for his anxiety complaints. Was just seen on 01.15.04. Has already been through Amitriptyline and Serenquel in the past. His complaint remains same. It seen c/o poor sleep. Claims he sleeps 1-2 HS @ night.
		Says Elavil was better, "but I had the reaction on it"
		A: Attempt increase in Benadryl
		P: 1/2 c Benadryl 50mgm PO Q HS
		Elavil 75mgm PO Q HS (X) 60 days-
		Tit R. Paterson

2/11/04

IND CEMIC/UR.

WT: 196 HT: 5' 8" BP 120/82

R: MD P: 26 T 978

see CC sheet. Mmmmm

Age 40.

Type II DM, Asthma, Gout
 s. Denies hypothyroidism.
 Don't want to be on a diabetic,
 or low fat, low cholesterol diet.
 wants to have more fixed.

a. recent male vas.

car regular

Long clean

abd - soft (HBS NT)

Extremities - 5 edema. Good CNS

A. Type II DM - stable.

Hypertension

Chronic sinusitis

Asthma - stable, 5 meds

Chronic - kidney stone, eg

00846

DOB: 11-07-63

00847

DATE	TIME	PL
1/10/03	1650	- patient left taking insert by ACOS in stable condition
		insertion

STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY

INFIRMARY PROGRESS NOTES

NAME Aholeki, StarSSN 601-10-1256DOB 11-17-63

DATE	TIME	PLAN
12/2/03	1900	S/O - alert, ment x3, Ø emphyse, med emphyse A - Stable P - urine & core normal
		Dec 3, 2003 Wednesday
12/2/03	0500	IM kept throughout the night. Respirations regular & unlabored. Hourly checks done. C. N. Khan RN
12/2/03	0920	S/O: Ø complaint. Got up - leaned forehead on door, feet stiff. ① wrist wrapped w/ ace wrap. Ø pain in jaw or ① wrist A - Stable P - Continue to monitor. C. N. Khan, RN
12/3/03	1100	S: "I'm okay. Am I going to be discharged? The doctor did not take out the wires from my mouth." O: Pt. concerned not possible discharge since in infirmary & wires in his mouth. A: Ø x3. N/A A: Concern not possible misconception re discharge. Physically stable P: Read consultant report.
	1700	Consult report does not indicate wires were removed. Will hold pt in infirmary until consultant report & MD order management.
	2100	Stable. Quiet concerning N. M. Locke, RN

even
243
12/4/03

Dec 4, 2003 Thursday

0430 IM slept throughout the night. Respirations regular & unlabored. Hourly checks done. All clarifications from MD about DC pt. wires are still intact. Consult made for removal of wires. Given to nurse.

12/4/03 1300 S/O's of complaint of jaw pain & (L) wrist pain. At secretions, took meds. A+Ox3. A: Stable
P: Continue to monitor. CS share, RN

STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY

INFIRMARY PROGRESS NOTES

NAME Aholelei, StarSSN 601-18-1356DOB 11-17-63

DATE	TIME	PLAN
11-27-03	2130	S: I feel like my heart is beating fast & I hear the "thump" C: Pt Aro 3, BP 120/80, HR 165 SpO2 98% RA, RA 22 Skin slightly pale w/ mild anxiety, EKG done 108 hr Nothing acute. applied 20% Bristle 134 cont to monitor A: Rapid HB D: Continue to monitor, HR & VS. till stable — VD
	2155	Admission: HR 91, RR 18, pt appears stable SKIN w/ ambulated to cell block & straight gait — VD NOV. 28, 2003 FRIDAY
11-28-03	0500	IM slept throughout the night. Resp. regular & unlabored. Hourly checks done. — (A & V)
11/28/03	1345	S/O: Feeds OK. HR fast last night when HS med. taken EKG done. A & O x 3. A drug (D) not done & swelling to reduce. A: Stable P: Continue to monitor c. Spans
11/28/03	1900	S - 56 complaints this shift. O - 056 clean dry intact. med. taken. D - Will observe. — Phonetic
		11/29/03 Sat
11/29/03	0508	Hourly rounds made. Regular respirations noted on all rounds in gallant m
11/29/03	0710	S/O "Jim they" Lack his respirators - No complaints - Wife hee visiting - Denial A & V unit. A - Stable R - cont. to monitor — Phonetic
		11/30/03 Sun
11/30/03	0500	Hourly rounds made. Regular respirations noted on all rounds in gallant m
11/30	0940	S: Am good. That's the same dressing since I was with the doctor. he'll change next week. D: Meds m. and all dressings underneath up to

Continued

chessing. Just put the new dressing on top.
 Took the meds & problem. Cooperative
 & friendly. - smiles - Blair

11-30-03

- 20 -

SPD - im okay, A/D x31 med. compliant. Ate dinner & fair
 appetite. Cooperative & cheerful. Denies any further
 complaints -

A - Stable

P - Continue to keep ent

Dec. 1, 2003

Monday

12-1-03

1800

IM slept throughout the night. Resp.
 regular & unlabored. Hourly done. C. McL LPN

12-1-03

1430

S/O: no complaint. Pt got up to take med, exercise Divert

A - Stable

P: Continue to monitor. Dr. Pedersen ordered EKG ent
 today - a Stem, RE

12/1/03

2255

S/O: alert, with x3,
 EKG take is ordered, med
 complaint

A - Stable

P - continue to ent morning

Dec. 2, 2003

Tuesday

12/2/03

0500

IM slept throughout the night. Respirations
 regular & unlabored. Hourly checks done.

C. Nakan LPN

12.102/03

0700

S/O: "I think I'm going out today."

Took his medications & problems - Pleasant
 and cooperative - No complaints

A - Stable

R ent. to admit pt. - Abnir

2000

12/2/03

1300

Ensure I can QCB x2 weeks

V.O. B. Bionuzzese MD

Adm
11/11/03

249/ 12/2/03 2030 -

00856

STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY

INFIRMARY PROGRESS NOTES

NAME Aholelei, StarSSN 601-18-1356DOB 11-17-63

DATE	TIME	PLAN
		NOV. 24, 2003 Monday
11-24-03	0500	IM slept throughout the night. & complaints Respirations regular & unlabored. Hourly checks done. Need to reschedule outside DR. & appt. that were missed on Friday. C. Neff-Lyon
11/24/03	0700	Off "No Complaints" Jock restriction & pt. Mues - VSS - Hebrule. H. have wound showing intact (ap site) No complaints offed & VSS. A. Stable P. Int. to monitor pt. — Frank
11/24/03	1645	2) PT requesting CTM for post-nasal drip. User denied at state that it works but still a post nasal drip. 1) PT in VSD, - alert, oriented. A) 1) Rhinitis, chronic rhinos. 2) Post head trauma. P) 1) CTM 10mg up to tid given rhinitis exacerbating x tach. 2) Continue to the current Meds / Px.
		Noted to 11/24/03 Need to check order (10mg) 11/24/03 OS 2401 11-25-03 0530 RT
11/24/03	1815	S: "Can I have CTM? med" Have nasal drip O: CTM administered per Dr order 18:00 PM. PT A&O No other complaints. Complains 2 medications. Ate full meals. Listening to head set & smiling. A - Stable at this time P - Continue to monitor — Backman, Brian R.V.
		NOV. 25, 2003 TUESDAY
11-25-03	0530	Regular respirations noted & 1 st visual ✓. — R. Fy. R.V.

11/25/03 1430 S/O: Pk uplink - A+O x3
 A: Stable
 P: Continue to monitor. C. Dore, RN

11-25-03 2100 S/O: A+O x3. VSS. Listened to head phones most of shift. Tolerated meals. Took all med. did dressing to wrist. & complaints.
 A: Stable
 P: continue to plan of care C. Dore, RN
 NOV. 26, 2003 Wednesday

11-26-03 0500 IM slept throughout the night. Resp. regular & unlabored. Hourly checks done. C. Dore, RN

11-26-03 0800 S/O: "I'm feeling good" - No. Complaints -
 Appetite good - Resting on + off -
 A: Stable
 P: Cont. to monitor - C. Dore, RN

11/26/03 2220 S: "Complaints I'm feeling good"
 O: A+O x3 VSS Tolerated meal + Enema.
 Complaints in med.
 A: Stable
 P: Continue plan of care - C. Dore, RN
 NOV. 27, 2003 Thursday

11-27-03 0500 Rept. all night. Resp. regular & unlabored. Hourly checks done. C. Dore, RN

11-27-03 1240 S/O: H/A. Motim 400 mg taken @ 1200 for h/c. ✓ (L) wrist blood dried on incision covered w/ opsite, then gauze & tape and ace wrapped. A+O x3. pt. had visit this am.
 A: Stable
 P: Continue to monitor. C. Dore, RN

STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY

INFIRMARY PROGRESS NOTES

NAME Aholelei, StarSSN 601-18-1356DOB 11-17-63

DATE	TIME	PLAN
11-19-03	2130	S: Bilateral kidney pain O: Intake 800 mg PO C. 1715 gms. Pt. smiling & feeling O.K. Complaints re: jaw or D wrist sitting in dark listening to music. A: All in comfort P: Continue to monitor. C. Shan, RN
NOV. 20, 2003 Thursday		
11-20-03	0545	IM slept throughout the night. Respirations regular & unlabored. Hourly checks done. Administered IM AM meds @ 0540 due to going to court. Will be going to intake @ 0600. C. Shan, RN
11-20-03	1420	11-20-03 Pt. left cell before am shift started. Pt has not returned to infirmary. C. Shan, RN
11-20-03	1600	S: "I'm O.K." O: A&O x3, IN NAS. A: STABLE P: Monitor
	1900	Pt. A&O well. Asking for solid foods. Looking back to court tomorrow. Squeezed side (-) wrist healing well. OPCI intake. DNR applied & was wrapped. N. M'Loon, RN
	2200	Sleeping
NOV. 21, 2003 Friday		
11-21-03	0430	IM slept throughout the night. Complaints. Respirations regular & unlabored. Hourly checks done. IM will be going to court today @ 0600. Will administer AM meds prior to movement. C. Shan, RN
11-21-03	2000	S- No Complaints. O-

11-21-03	1430	S: Count was all right. Feels good & I ate regular food in court - apple O: Feels ok. ϕ pain in (D) wrist, jaw A: Stable P: Pt returned @ 1315 from court. He missed his two medical follow-ups to Dr. Allen Strasburger & Dr. Au today & needs to be rescheduled. c - Jones, R
11/21/03	2100	S - No complaints O - No report of pain this shift. A - Will observe information
NOV. 22, 2003 Saturday		
11-22-03	0530	IM slept throughout the night. Respirations regular & unlabored. Hourly checks done. C. R. K. W.
11-22-03	0900	S: "Awake" In good spirits - states "I want to eat solid food now. I don't want to be the doctor" Took ensure & no complaints. Offense - Took his meds. & problems - NAD A: Stable P: Cont. to monitor. information
11/22/03	1515	S: "I still have sinus problem" O: Up and lib inside his cell. A/O x 3. Took pm meds & problem, took ensure. In NAP. A: stable P: Cont. to monitor. information
11/23/03 Sun		
11/23/03	0500	Hourly rounds made. Regular respirations noted on all rounds - information
11/23/03	1453	S: "I'm doing good." O: A/O x 3. Listening to his abdomen. med. complaints tol. meals. D wrist/arm & sec wrap intact. A: stable. P: cont. & plan of care. information
11/23/03	2130	S - "I'm ok." O - A/O x 3. Responds appropriately. No c/o pain. Day clean dry intact. information

STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY

INFIRMARY PROGRESS NOTES

NAM Aholelei, Star
SSN 601-18-1356
DOB 11-17-63

DATE	TIME	PLAN
11/15/03	2100	back in room, resting to 40 "fine" — Baker Nov 16, 2003 — Sunday
11/16/03	0500	appears ashy noted on all limbs rounds made c regiminations seen + unlabored; 40 —
11-16-03	0955	S: 2 complaints. O: A/O x3. Resting in bed. Tol. meals. Med. compliant and cooperative. D: No pain. A: Stable P: Cont. in current tx and mont. — 88888888
11-16-03	2000	S: "I'm OK" O: Acknowledge to it head intact, @ cms, 40 Oxygenated or Swelling; able to take in liquid ate well & meal served. App: Continue to Assess patient; instructed in /is to notify RN Nov. 17, 2003 Monday
11-17-03	0500	Slept through out the night. Resp. (F) Hourly checks made. — 88888888
11-17-03	1230	S: I feel better O: VS stable. Mide taken. Pt walking steadily. A+O x3. A: Stable P: Pt. has opt in Dr. Strasburg today. Continue to monitor. C. Baker, RN 2-10
		S/O - I'm alright; A+O x3; mid. compliant; cheerful & cooperative. Ate meal & tolerated well. No further complaints made — A: Stable P: Continue in cur
		NOV. 19, 2003 Wednesday
11-19-03	0500	IM slept throughout the night. Resp. regular & unlabored. Hourly checks done. — 88888888

Nov. 18, 2003 TUESDAY

11-18-03 0530 Regular respirations noted & 10 vital ✓ — R. to RN

11-18-03 1330 S: Depressed

O: pt. didn't take his seroquel last night - used for sleep. O: wrist has spots, dried blood, flat & drain & pain pt requested to talk to Dr. Patel.

A: Depressed

P: Dr. Patel informed. Continue to monitor c. Dr. Patel

11.18.03: P8: Day

1420

Pt seen per RN request. Reports high levels of anxiety & not sleeping well & at all at night. Wants to focus on his having been assaulted by gang members on his module & resultant jaw fx. Says he is in the infirmary still "recovering".

A: More stressed → 20 Insomnia

P: DIC Previous Seroquel orders.

- Begin Seroquel 300mg po qd (X)
30 days.

Jit U. Patel, MD

11/18/03
1420

24° ✓ 11/18/03 2300 ✓

11/18/03 1920 V: 1 complete, alert, mouth x 3, pleasant, good appetite, not in pain

A: Stable

P: continue to monitor / assess

Nov. 19, 2003 Wednesday

11-19-03 0500 IM slept throughout the night. Resp. regular & unlabored. Hwily checks down. c. 10:00 am

11-19-03 1330 S: of complaint

O: pt. requested Motrin 800mg for Htg. Jaw & swelling & pain. Pt rested in am. & went to intake for police interview & lunch.

A: Stable

P: Continue to monitor. c. Dr. Patel, RN

00862

STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY

INFIRMARY PROGRESS NOTES

NAME Aholelei, StarSSN 601-18-1356DOB 11-17-63

DATE	TIME	PLAN
11-13-03	1020	MDO:
	noted	✓ (R) wrist R/O Foreign object, if time permits.
	11/13/03	by Dr. Lee Au.
	1200	✓ Dr. Paderu, OK
	1030	MDO:
	✓ with	TCT Kim at Dr. Au's office. She will relay
	11/13/03	messages to Dr. Au, who is in a procedure. Dr. Au
	1220	has already scheduled (L) wrist surgery for f.o. removal
		+ may not be able to ✓ (R) wrist prior to surgery.
		RN in infirmary to ✓ Dr. Paderu. C-Scan, OK
	1220	MDO:
	✓ with	Go ahead and do surgery on (L) wrist.
	11/13/03	✓ Dr. Paderu / OK
	1220	TCT Kim at Dr. Au's office. Dr. Paderu's message
	✓ with	relayed to removed f.o. in (L) wrist. C-Scan, OK
	1220	S/O: IM left p. showing f.meds, f.VS done +
		NPO since 2400.
		A: NPO -
		P: Surgery on (L) wrist to remove foreign object by
		surgeon - Dr. Lee Au. (R) wrist to be checked later by
		MD at HCF. Pt. left info @ 0952. C-Scan, OK
	1400	Addendum: Pt. returned from Surgery. (L) arm in
		dressings + ace wrapped. VS done + stable. Keep (L) arm
		elevated. ✓ Consult's recommendation + findings returned
		to pt. Foreign object sent to lab per pt's knowledge. C-Scan
11-13-03	1600	S/O: 973. Ace wrap on L wrist D/I. Moves fingers well.
		good appetite
		A: Post op status
		P: Monitor PRN. Sullivan RN
11-13-03	2000	S/O: Hs med taken well. Pt. pain operated L wrist.
		A: alt in comfort.
		P: Motrin 600mg (advised) given for pain. Sullivan RN

NOV. 14, 2003 Friday

11-14-03 0500 IM slept throughout the night. & complaints.
Resp. regular & unlabored. consult for F/U
in 1 week made. VSS. Hourly checks done.
C. N. K. L. P. N.

11-14-03 1430 S: of complaint
O: pt requested motion 600mg for @ arm pain - dull
1-10 (0-10) pt. feels OK. A x O x 3.
A: Stable

P: Continue to monitor. C. N. K. L. P. N.

11-14-03 1500 PT WAKE, TAKING STEPS &

met with

S: "I'm doing"

O: A: D x 3. IN NAD.

(L) jaw still larger than (R) jaw
but swelling remarkably ↓.

All wrap on (L) arm. Fingers (L) hand
warm, pulses (+).

A: Stable

P: Monitor N. M. Lockhart RN

2000 (L) wrist dress removed. Spot on wound,
sm red. Suck blood under @-cit.

No noted swelling. Fresh dressing &
kerlix placed over @-cit.

PT is no complaints N. M. Lockhart RN

NOV. 15, 2003 Saturday

11-15-03 0500 IM slept throughout the night & complaints.
Respirations regular & unlabored. Hourly
checks done. wrap still intact to @ hand.

11-15-03 0800 S: When my arm it C. N. K. L. P. N.

0800 S: When my arm. I take it for my arm. VSS - appeared
OK - (L) FA doing CO2 able to open & close
mouth & @ pain. Took meds. friendly &
cooperative All wrap to (L) FA will so
w/ @ - finger pulse (+) CMS (+) - @ pulse

1645 in hallway talking on phone - no changes
continue to be doing good. friendly & cooperative
expresses self well. Dmg intact CD - @ pulse

00864

STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY

INFIRMARY PROGRESS NOTES

NAME AHOLELEI. Star.SSN 601-18-1356DOB 11-17-63

DATE	TIME	PLAN
<u>Sunday November 9, 2003</u>		
11/9/03	0730	Received IM Asthma inhaler in bed in assigned room. Appears to be sleeping in MD & Resp. notes RRR at 2 P. usual checks throughout the night. S: "alright"
11/9/03	1000	O: on chemo, respiratory, back to meds + Envy 5 problem; VSS; w/ke intact, able to swallow / stable P: cont to monitor / issues; instructed nurse to notify me 2-10
		AD - MD x 3; med. compliant & cooperative. ate meals & fair appetite. Envy taken & tolerated well - cooperative & cheerful
		A: Stable P: Continue to monitor /
<u>Monday Nov 11 2003</u>		
11/10/03	0520	Cough all night. Resp. even and unlabored when checked. W/ke intact in nurse station & Corridor
11/10/03	1430	S: & complaint D: Acting in bed. Pt noted he has surgery tomorrow & swelling in @ arm. A: Stable P: Continue to monitor. C. Ware, RN
11-10-03	2000	S/O: up in Room, ate well. C/o slight SOB. chest ctA Bilaterally. O2 sat 96% & cough. A: all in Comfort P: monitor for SOB, wheeze. C Sullivan RN
<u>NOV. 11, 2003 Tuesday</u>		
11/11/03	0430	Pt. slept throughout the night. Respirations regular & unlabored. & complaints. Hourly checks done. C. H. K. LPN

11/11/03	1430	<p>S: (R) worst foreign object - possible + (R) kidney pain from kidney stone.</p> <p>D: Pt. requested richuck & Dr. Kuchen peger at Castle M.C. for his kidney pain. Mother 800 mg sum for pain.</p> <p>Pt. Smiled & happy to be alive. Resting in bed listening to music.</p> <p>A: A/G in comfort</p> <p>P: TCT Dr. A. MD to wal (R) worst tomorrow.</p> <p>✓ Theresa on cprst for outside mb tomorrow.</p> <p>Continued to monitor C-Deane, RA</p>
11/11/03	1800	<p>S: "Solutions I have hard time breathing. I have bronchitis. They took X-ray of my chest."</p> <p>O: Inmate c/o SOB - inmate & unlabored respiration RR 16-18 on assessment. Lungs CTA, Occasional dry cough. Ate meals 100%. Up ad lib in the infirmary</p> <p>A: Alteration in comfort.</p> <p>P: Continue to current plan of care. Medications administered as ordered. ——— Rheng L. Lark, RN</p> <p>NOV. 12, 2003 Wednesday</p>
11/12/03	0330	<p>IM slept throughout the night. Respirations regular & unlabored. Hourly checks done.</p> <p>————— C. K. K. ——— LPN ———</p>
11/12/03	1815	<p>S: "Will the doctor see me today?"</p> <p>O: Informed inmate that MD will not be able to see him today. Informed him that he will have nothing by mouth P midnight tonight due to procedure on the (L) waist tomorrow. Verbalized orders pending.</p> <p>AP x 3. Up ad lib inside his cell.</p> <p>A: Stable.</p> <p>P: Cont. to current plan of care. ——— Rheng L. Lark, RN</p> <p>NOV. 13, 2003 Thursday</p>
11-13-03	0500	<p>IM slept throughout the night. Complaints? was instructed to be NPO P midnight. IM has not ate or drank anything on my shift.</p> <p>VSS. Respirations regular & unlabored. Hourly checks done. ——— C. K. K. ——— LPN</p>

STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY

INFIRMARY PROGRESS NOTES

NAME AHOLELEI. STAY
SSN 601-18-1356
DOB 11-17-63

DATE	TIME	PLAN
11-4-03	1845	S: no complaints P: Lying in bed listening to walkman. TV. liq. diet, ate 100% of meal. Denies any jaw pain. Med compliant A: Stable P: Cont to monitor König, RN NOV. 5. 2003 Wed
11-5-03	0800	asleep through the night respirations noted q.i. all sounds 7/10
11-5-03	0945	S: Feels better O: pt in bed - smiling. mls taken. Flunisolide nasal - SA today. no problems no pain noted. A: Stable P: Continue to monitor. Consult to Dr. Raaburg grants Theresa - C. Jones, RN
11/5/03	1600	S/O: pt. A 90x3. VSS. Tolerated 100% of liquid diet. TOOK PM meds. Requested for tylenol. Given it takes 325mg. 50 HA. T: 98.6. Sitting in bed listening to walkman. no complaints. A: Stable P: continue to plan of care. C. H. L. RN THURS. NOV. 6 2003
11/6/03	0530	Call up all shift. Ref. even anal rectal exam when checked & h. m. w. c. w. available. X Carver
11/6/03	1330	S: no wrist pain + swollen + spots in eyes 10-15 min. o.h/a O: pt. told rd he felt a hard object in (R) wrist vein today palpated object may be a foreign object. Motrin 800mg given to pt. @ 1315 for h/a - generalized. Pt. went to bed rec in a.m. no jaw pain no (R) pain today. A: All in comfort P: Continue to monitor. MD eval requested by pt. C. Jones

11-6-03 1730 S/O: (Cafeteria - walking in cell ate well. Verbalizes concern about hard firm area 3mm anterior aspect of Rt hand, state from last IV 2 wks ago. palpated area - feels hard & tender & pt. S/S of inflammation. offers no other complaints.
A: Allt in comfort
P: Monitor PPN. Sullivan RN

11-6-03 2000 +98? As meds taken well. offers w/c
Sullivan RN

11-7-03 0430 (P) Resp on hourly Rounds. Sullivan RN

11-7-03 130 Ulceration on cheek due to wires in mouth. Ortho wax given to cover.

11-7-03 1345 S/O: Wire on (R) upper jaw poking out. Can I see DDS?
O: PT was seen by DDS in clinic this pm. He has ortho wax to cover wire - SA. PT remains on liquid diet. (L) jaw / cheek swollen & painful.
A: A/H in comfort
P: Continue to monitor. C. Stone, RN

11-7-03 1400 PT. H&O x3 w NAD

1800 S: "I'm doing good. My Sx is better."
O: WOUND ♂ IN NAD.
A: Stable
P: Monitor

2000 No L in studies
stable & monitor ——— N. McCorda, RN

NOV. 8, 2003 Saturday

11/8/03 0515 pt. slept throughout the night. Respirations regular & unlabored. Hourly checks done.
C. McKen RN

11-08-03 0930 S/O: I'm up in cell this am. VS. Stable. Voided & ate at this time. took all am meds.
A/P: stable cont to monitor ——— J. Phelps RN

11-8-03 2020 S/O: NO complaints. PT H&O x3. Tolerated meals & N/V. Med complaints & any complications. PT states he feels better.
A/P: Stable. Cont to monitor ——— A. McCorda, RN

STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY

INFIRMARY PROGRESS NOTES

NAME AHOLELEI. stay

SSN 601-18-1356

DOB 11-17-63

DATE	TIME	PLAN
10/31/03	2200	Received awake and alert saying: "I'm OK thanks" no C/O @ this writing ————— in gallant
	2300	Lying in bed, eyes closed regular, unlabored, respirations noted @ this time in gallant
		11/1/03 Sat
11/1/03	0500	Hourly rounds made. Regular respirations noted on all rounds @ occasional position AS ————— in gallant
11/1/03	1330	S: "My jaw is kind of sore, can I get pain meds?" O: IM A 90 x 3. VSS. Tolerated liquid diet 100%. Took all of AM meds plus it took 325mg Tylenol due to pain. A cough noted. Stayed in bed reading most of shift while listening to music. @ 1315 IM w/ lightheadedness & some nausea. T-98.4. Admin. it took 325mg Tylenol. Informed IM to notify us if symptoms don't subside. ——— A: alteration in comfort. ——— P: continue to monitor. @ Nakam LPN
11/1/03	1600	S/O in bed & his wife smiles when spoke to. Taken his PM ensure offered. Tylenol if he need. IM very hypertensive. Taken 2 Tab of Tylenol. Food intake good. No S/O any discomfort A stable P will continue to monitor Florence P
	1700	C/O having diarrhea. Repts bowel 30cc given Explained to IM that sometimes ensure is not tolerated in the and causing LBM. Verbally ensure help stop his diarrhea Will monitor Florence P

11/1/03	2200	Received awake, a+0 x 3, an in NAD. Waved to this writer, denies any c/o @ this writing ——— M Gallant M
		11/2/03 Sun
11/2/03	0500	Hourly rounds made. Regular respirations noted on all rounds ——— M Gallant M
11/2/03	0630	A/O, AM meds given. Denies c/o @ this time. Had phone call this AM, pleasant. Cont to monitor ——— Muzza
11-2-03	2000	S/O! In cell, ale well, offers N/C ——— A/O x 3 A: Stable PIC: monitor PRN, Callum C/O
		11-3-2003 Monday
11-3-03	0800	asleep through the night respirations noted during p/v all rounds ——— J.R.
11-3-03	1100	S: Feeds better, mid reg. O: Pt. has mid recreation now. VS done, mids taken & painless & swelling (L) and (R) cheek & (R) cheek observed, & swelling & bleeding & bruising. mids taken VS done. Resting on bed & looking forward & ear phone A: Stable P: Continue to monitor. C-Flora, RN
11-3-03	1050	S: c/o HA, requesting for pain med. O: Pt alert, pleasant / cooperative. Ate 100% of meal. Amb. & already gait in cell. Motion 400 mg po given. Denies any jaw pain. A: All in comfort P: Cont. to monitor & cont. to current tx ——— K. Muzza, RN
		TUESDAY 11-04-03
11-04-03	0400	Received innak already asleep. Slept through the noc, & noted c/o pain. Respirations regular, unlabored during visual checks. ——— Rheng I. Horta, RN
11-4-03	1145	S: H/A on (L) side of head only. Yesterday afternoon light sparks in eyes (blind spot), h/a (L) x 5 min & past H/R x 10 min together. O: Pt. c/o HA today was not like HA today - mild today, motion 400 mg po given. Feels better & jaw pain on (L) side of jaw pain. Pt. requested solid foods, & coughs A: Stable P: ✓ Thru on Dr. Strasburger's appt. Continue to monitor.

STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY

INFIRMARY PROGRESS NOTES

NAME AHOLELEI- Stav.SSN 601-18-1356DOB 11-17-63

DATE	TIME	PLAN
10-29-03	1330	<p>3: "When am I going out to have this thing removed?" D: Pt given new meds: Keffex 500mg PO tid + Robitussin DM 10cc prn cough @ 1325. His (L) arm continues to be painful 6 (0-10) & foreign object in wrist & forearm has tenderness for "vein" & redness at site. Palpitated "vein" (R). Jaw pain 2 (0-10) meds taken & VS done. T 99.4. Refused bloodwork today A: Aft in comfort & bronchitis P: Theresa notified that pt. was not seen by anyone yet. He Continues to monitor. C. Shan, RN Addendum: Appt @ Dr. Lee Au made @ his PO per Kamohi office 1330 tomorrow. Left note for Theresa Special transport as separate inmate needed. C. Shan</p>
10-29-03	1900	<p>S/O: Sitting on bed listening to tape & ear phones on. offers N/C. Pleasant. takes his meds & difficulty. T 98.9. Good appetite. A: Stable P: Cont @ current plan of care. Sullivan LPN</p>
OCT. 30. 2003 THURS.		
10-30-03	0800	<p>asleep through the night respirations not 21% all make rounds</p>
10-30-03	1345	<p>9: Please check when am I going out to get this thing removed? D: Pt. was told he's going out to MD. He requested Enam. he continued for 1 month because he lost it & can't drink milk because of milk intolerance T 99.2 P 129 R 20 BP 100/50 O₂ 96% Tylenol 650mg prn pain. Meds taken. Pt. sitting in cell. Jaw pain same as yesterday A: Stable P: MD renewed request for Enam. Continue to monitor. C. Shan RN</p>

10/30/03 1430 MDO: (

Ensure 1 can PO @ every meal, x / mouth.

VO Padesas, MD/ci

24g/V 10.31.03
0100

Noted 10/30/03 AK

10/30/03 2150 S: Complaint of pain in upper jaw area. Pointed to a small lump on his wrist area. Said the doctor would remove it soon.

O: A X O X 3 Requested Tylenol for his hand pain & jaw pain. Compliant @ meds, ate meals. Appropriate response @ questions & answers. Gave Tylenol & expressed some relief.

A: Alteration in comfort. ~~AK~~ Small lump in left wristP: Continue to monitor ~~Barbar Ben kn~~

AB

~~Addendum~~

Oct. 31 - 2003 Friday

10/31/03 0800 asleep through the night respirations noted during 1st & all rounds. J/K

10-31-03 1015 S: upper gum pain, irritated where wire is in front & (C) arm pain. Dr. ~~AK~~ going to remove object from (C) wrist & going to arrange it @ this place.

O: It's freem on upper gum to lip is red & d. swollen from wire behind it. pain 6 (0-10) @ 07:00 p.m. & reduced to 2 @ 1015 after pain med given orally. (C) arm pain 1 (0-10). Dams palpitated & hardness @ 2-3 1/2" from wrist; foreign object at 1/2", 1" (+); vein lump @ 8" (+). T 99.8 @ 0710 Tylenol 650mg PO @ 0715 for fever. Pt. feels better now - med taken. & coughs.

A: Stable

P: Continue to monitor. C. Shan, RN

10-31-03 2110 S: I need more oxygen to sleep. I feel hot.

O: HS impeded by pt. T 99.0 F @ 1915. Tylenol 650mg given for fever. Pt. ready to go to bed & listening to music on headphones.

A: ↑ temp - fever

P: Continue to monitor. C. Shan, RN

STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY

INFIRMARY PROGRESS NOTES

NAME

Aholakei, Star

SSN

601-18-1356

DOB

11-17-63

DATE	TIME	PLAN
		2-10
		S/O - A/P x 3, red compliant; up & about inside room. All meal & fair appetite. Concerned abt, possible foreign body on arm - VSS -
		A - Stable P - Continue to watch / G row
		OCT-27-2003 MON.
10-27-03	0800	asleep through the night respirations noted during all round q.i.v
10-27-03	1500	S: Pain in jaw - 5, pain in @ arm 7. PT requested pain med. O: VS done T/100. mds grin. PT wants to have foreign object removed asap. PT wants to see MD. & swelling in @ arm & redness. A: All in comfort & abt in skin integrity. P: MD well requested. Theres has made appt for pt to see surgeon tomorrow. — C Star, RN
10/27/03		S: "I'm doing ok" O: Appears comfortable & complaint of pain appetite good 100% A: Stable P: cont & care plan
		V Lysa RN
		OCTOBER 28, 2003
10/28/03	0500	IM kept throughout the shift. & complaints. Respirations regular & unlabored. will be going out Tuesday for surgical removal of metallic obj. in @ arm/wrist. Hourly checks done. — C Star LPN
10/28/03		✓ CBC, ✓ CMP, ✓ UA Cox ray pre lateral 12/0 phtnata ✓ 10/28/03 1130a 21/11/2003

10/28/03 1150 S: I don't feel well. I was told by mya that my appt. was cancelled.
 O: Pt returned to ull after leaving for surgery. He reported above to RN. RN checked & RN saw pt. to report his T 100°F for past 6 days. Dr. A. wrote out orders + pt. was taken to St Francis West ER. CX-RX + lab forms included @ @ arm X-ray. Mds given + VS done in a.m. Pain in jaw 4 (0-10) + @ arm 6 1/2 (0-10). no change in @ arm. A: All in comfort.
 P: Pt. was sent to SF West ER for surgery to remove foreign object in @ arm. CX-ray + lab. C. Ray.

10/28/03 2220 S: c/o of pain @ wrist + congestion in chest.
 O: Lungs clear. Returned from L-ray per ordered. Impression bronchitis. Temp 99.6 at 16:30. Gave Tylenol 650mg. Gave Robitussin for congestion.
 A: Response good. Expressed relief from Tylenol. Compliment & medication.
 P: Continue to monitor. Will have MD review consult. + AM orders. *Barbara Bunker*

OCT 29. 2003 Wed

10-29-03 0800 asleep through the night respirations not during all rounds qiv ——— J/V

10/29/3 12 pm 1ml/hr 500mg i po qid x 7 days

Robitussin DM

10cc po q 4 prn cough x 2 weeks.

(order per dr Lewis)

[Signature]

24
 J/V
 10-30-03
 0100

